

2637  
JFW

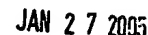
<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application No.	09/887,455	
	Filing Date	June 21, 2001	
	First Named Inventor	James C. Kolanek	
	Art Unit	2637	
	Examiner Name	Jacob M. Meek	
Total Number of Pages in This Submission	9	Attorney Docket Number	3326P009

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input checked="" type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Return Receipt Postcard, Cited Reference B</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Michael J. Mallie, Reg. No. 36,591 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	January 24, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name	Ines Francetic	Date	January 25, 2005
Signature			

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 06/04/2004.  
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Patent fees are subject to annual revision.

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b>	<b>0.00</b>
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Application Number	09/887,455
Filing Date	June 21, 2001
First Named Inventor	James C. Kolanek
Examiner Name	Jacob M. Meek
Art Unit	2637
Attorney Docket No.	3326P009

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

\_\_\_\_\_, is/are authorized to: (check all that apply)

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	<input checked="" type="checkbox"/> Credit any overpayments

### 1. EXTRA CLAIM FEES

Large Entity	Small Entity
<p>1. <b>Revenue</b></p> <p>2. <b>Expenses</b></p> <p>3. <b>Assets</b></p> <p>4. <b>Liabilities</b></p> <p>5. <b>Equity</b></p>	<p>1. <b>Revenue</b></p> <p>2. <b>Expenses</b></p> <p>3. <b>Assets</b></p> <p>4. <b>Liabilities</b></p> <p>5. <b>Equity</b></p>

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)	(\$)	0.00
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**\*\*or number previously paid, if greater, For Reissues, see below**

ADDITIONAL FEES	
Large Entity	Small Entity
<p>1. Filing fee: \$1,000</p> <p>2. Service of process fee: \$100</p> <p>3. Court costs: \$50</p> <p>4. Attorney's fees: \$1,500</p> <p>5. Travel expenses: \$200</p> <p>6. Other expenses: \$100</p>	<p>1. Filing fee: \$500</p> <p>2. Service of process fee: \$50</p> <p>3. Court costs: \$25</p> <p>4. Attorney's fees: \$750</p> <p>5. Travel expenses: \$100</p> <p>6. Other expenses: \$50</p>

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,590	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451		2451		Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

**SUBTOTAL (2)****Fee Paid**

Complete (if applicable)

Name (Print/Type)	Michael J. Mallie
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**36.591**

Telephone (408) 720-8300

Date	01/24/03
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**Signature**

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 12/15/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

JAMES C. KOLANEK

Application No.: 09/887,455

Filed: June 21, 2001

For: **FEEDBACK CHANNEL SIGNAL  
RECOVERY**

Art Group: 2637

Examiner: Jacob M. Meek

**INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In accordance with the duty of disclosure, enclosed is a copy of Information Disclosure Statement by Applicant (form PTO/SB/08), which is being submitted before the mailing of a final Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

The references were cited in a communication in a counterpart PCT application on December 9, 2004, in a counterpart PCT application.


The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

Please charge any fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Respectfully submitted,

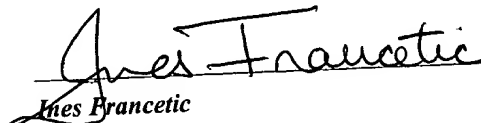
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: January 24, 2005

  
\_\_\_\_\_  
Michael J. Mallie, Reg. No. 36,591

12400 Wilshire Boulevard, 7th Floor  
Los Angeles, CA 90025  
Telephone: (408) 720-8300

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Ines Francetic

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Date

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Substitute for form 1449A/PTO

Substitute for form 1449A/PTC

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

## Sheet

2

**of**

2

**Complete if Known**

Application Number

09/887,455

Filing Date

June 21, 2001

First Named Inventor

James C. Kolanek

Art Unit

2637

Examiner Name

Jacob M. Meek

Attorney Docket Number

3326P009

**NON PATENT LITERATURE DOCUMENTS**

[illegible]

Examiner  
Signature

Date	
Considered	

<b>Examiner Signature</b>	<b>Considered</b>
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\*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

\*Examiner: Initial if reference considered, written or not.  
copy of this form with next communication.

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